2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005571

Entity Name: OVIEDO FOREST MASTER HOMEOWNERS' ASSOCIATION,

INC.

FILED
Mar 15, 2015
Secretary of State
CC6475353063

Current Principal Place of Business:

1320 N SEMORAN BLVD

100

ORLANDO, FL 32807

Current Mailing Address:

1320 N SEMORAN BLVD 100

ORLANDO, FL 32807 US

FEI Number: 87-0794937 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOWERS PROPERTY MANAGEMENT, INC 1320 N SEMORAN BLVD 100 ORLANDO, FL 32807 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BENJAMIN ISIP 03/15/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitleVPTitlePRESIDENTNameBLANNER, GREGNameBASCO, DAMONAddress943 BIGHORN STAddress613 COMANCHE STCity-State-Zip:OVIEDO FL 32765City-State-Zip:OVIEDO FL 32765

TitleTREASURERTitleSECRETARYNameBALL, CLIFFNameALCALA, JOE

Address 620 HOLLY SPRINGS TERR Address 2167 CAMEL LAKE DR
City-State-Zip: OVIEDO FL 32765 City-State-Zip: OVIEDO FL 32765

Title DIRECTOR Title DIRECTOR

Name COLE, DOUGLAS Name KISSANE, JESSICA
Address 2111 ROCKY BLUFF CT Address 780 HOLLY SPRINGS CT
City State Zip: OVIEDO FL 32765
City State Zip: OVIEDO FL 32765

City-State-Zip: OVIEDO FL 32765 City-State-Zip: OVIEDO FL 3276

Title DIRECTOR
Name TYNE, JAY

Address 589 COMANCHE ST City-State-Zip: OVIEDO FL 32765

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAMON BASCO PRESIDENT 03/15/2015